

HIGH DESERT HEALTH SYSTEM AMBULATORY SURGICAL CENTER

SUBJECT: XI-112 MEDICATION STORAGE, HANDLING OF OPEN AND EXPIRED MEDICATIONS AND INSPECTION OF MEDICATIONS IN THE ASC	POLICY #: 1269 VERSION: 1
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DATE APPROVED: 09/15/2017	

PURPOSE: To describe the expectations, procedures and monitoring (inspection) in place to ensure the safe storage and handling of open and expired medications at the Ambulatory Surgery Center (ASC).

POLICY:

1. All ASC medications shall be under the supervision of the Medical Director and must be stored under appropriate conditions of sanitation, temperature, light, moisture, ventilation, security, and segregation.
2. All opened and expired medications, including expired controlled drugs, shall be handled according to the following procedure.

DEFINITION:

Designated Nurse: A nurse who has been granted a Power of Attorney by the Medical Director to act as an agent to execute applications for books of official order forms and to sign such order forms in requisition for schedule I & II controlled substances, in accordance with 21 U.S.C. 828, Section 308 of the Controlled Substances Act & part 1305 of Title 21 of the Code of Feral Regulations.

PROCEDURE:

STORAGE

1. The ASC nursing personnel are responsible for maintaining proper storage of all medications.
2. Medications, which are affected by heat, shall be stored according to the following National Formulary Reference:
 - a. Cold place – having a temperature not exceeding 8 degrees C.
 - b. Refrigerator – a cold place in which the temperature is maintained between 2 and 8 degrees C.

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- c. Cool Place – having a temperature between 8 and 15 degrees C.
- d. Room Temperature – having a temperature between 15 and 30 degrees C.
- e. Excessive Heat – designates temperature ranging from above 40 degrees C.

EXPIRED MEDICATIONS:

1. At the beginning of each month, nursing and anesthesia staff shall ensure that medications with illegible/missing labels or medications that will expire during that month are removed from Pyxis stations and stored in a segregated ASC area until appropriate disposition.
2. Non-controlled expired medications can be discarded in the appropriate pharmaceutical waste bins.
3. Expired Controlled drugs are to be counted by the Medical Director's Designated Nurse, in the presence of the person returning the medications, and will be logged into the HDHS Control Drug Salvage Log and the Controlled Drug Inventory Log in the ASC.
4. All expired controlled drugs will be returned to the pharmacy, along with the salvage log.
5. Pharmacy will send the expired controlled drugs to contracted vendor for destruction and maintain a separate log of expired controlled drugs salvaged from ASC.
6. All expired controlled drugs will be listed on the form provided by the contracted vendor who received the expired controlled drugs.
7. Schedule II drugs will be listed on a DEA 222 form issued by the vendor who received the expired Schedule II drugs. Pharmacy, following receipt of the DEA 222 from the vendor, will keep the copy of the form and send a copy to the D.E.A.

OPEN MEDICATIONS:

1. All medications in the ASC must be utilized as unit dose. If a MDV is opened in the ASC, it must not be used on multiple patients and discarded after being opened.

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INSPECTIONS:

ASC Nursing shall:

1. Conduct monthly inspection, checking for outdated open pharmaceutical containers. If an open pharmaceutical container does not have an expiration date, it will be considered expired.
2. Conduct inspection whenever receiving medications from the pharmacy (for current labeling).
3. Remove medications from stock prior to the expiration date and return unopened medications to the pharmacy for safe disposal.

HDHS Consultant Pharmacist:

1. HDHS pharmacist shall inspect medication storage areas on a monthly basis to ensure that medications are maintained under appropriate conditions.
2. HDHS will inspect for outdated open and expired medications.
3. Written reports of the HDHS pharmacist's inspections shall be provided to the ASC Medical Director, ASC Nurse Manager and HDHS Pharmacy Director.
4. A quarterly Pharmacy Inspection report, with any trends or patterns, will be presented to the ASC Medical Advisory Committee for review and recommendations.
5. A quarterly Safe Injection Practice will be conducted utilizing the "Safe Injection Practice Audit Tool".

ATTACHMENTS:

1. Expiration Dating of Open Pharmaceutical Containers Chart ASC-March 2017.
2. High Desert Health System ASC Medication Inspection Record-
3. High Desert Health System ASC Medication Inspection Record-OR
4. ASC Safe Injection Practice Audit Tool

Original Date: 07/01/2003
Reviewed: 09/15/2017

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Next Review Date: 03/15/2020
Previous Review Dates: 07/17/08; 07/05/13
Previous Revise Dates: 07/17/08; 07/09/13